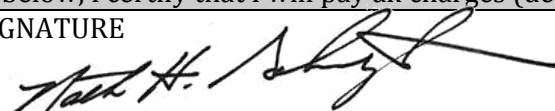


AO435 (Rev. 04/18; WDVA Rev. 11/19)		ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS		FOR COURT USE ONLY	
<b>TRANSCRIPT ORDER FORM</b>				DUE DATE:	
Please Read Instructions on Page 2.					
<b>1. REQUESTOR'S INFORMATION:</b>		NAME Nathan H. Schnetzler		TELEPHONE NUMBER 540-772-4600	
DATE OF REQUEST 1/5/2022		EMAIL ADDRESS ( <i>Transcript will be emailed to this address.</i> ) nschnetzler@faplawfirm.com			
MAILING ADDRESS 29 Franklin Road SW				CITY, STATE, ZIP CODE Roanoke, VA 24011	
<b>2. TRANSCRIPT REQUESTED:</b>		NAME OF COURT REPORTER Mary Butenschoen			
		OR CHECK HERE <input type="checkbox"/> IF HEARING WAS RECORDED BY FTR			
CASE NUMBER 7:21cv378		CASE NAME Doe v. Virginia Tech		JUDGE'S NAME Urbanski	
DATE(S) OF PROCEEDING(S) 12/14/21		TYPE OF PROCEEDING(S) Motion to Dismiss Hearing		LOCATION OF PROCEEDING Zoom	
REQUEST IS FOR: ( <i>Select one</i> ) <input checked="" type="checkbox"/> FULL PROCEEDING OR <input type="checkbox"/> SPECIFIC PORTION(S) ( <i>Must specify below</i> )					
SPECIFIC PORTION(S) REQUESTED ( <i>If applicable</i> ):					
<b>3. SERVICE TURNAROUND CATEGORY REQUESTED:</b> ( <i>See Page 2 for descriptions of each service turnaround category.</i> )					
<input type="checkbox"/> Ordinary (30-Day)			<input type="checkbox"/> Daily		
<input type="checkbox"/> 14-Day			<input type="checkbox"/> Hourly		
<input checked="" type="checkbox"/> Expedited (7-Day)			<input type="checkbox"/> RealTime		
<input type="checkbox"/> 3-Day					
<b>4. CERTIFICATION:</b> By signing below, I certify that I will pay all charges (deposit plus additional).					
DATE 1/5/2022		SIGNATURE 			

If you have any questions, please contact the court reporter coordinator at (540) 857-5152 or by email to [CRC@vawd.uscourts.gov](mailto:CRC@vawd.uscourts.gov).

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<http://www.vawd.uscourts.gov/media/1576/transcripts2018-3.pdf>

**NOTE:** Form must be flattened prior to electronically filing in CM/ECF so that all fillable fields can no longer be modified.